**BILL ANALYSIS**

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| Senate Research Center | H.B. 1848 |
| 86R19439 LED-F | By: Klick et al. (Buckingham) |
|  | Health & Human Services |
|  | 5/13/2019 |
|  | Engrossed |

**AUTHOR'S / SPONSOR'S STATEMENT OF INTENT**

H.B. 1848 seeks to improve infection prevention control programs at long-term care facilities in order to prevent outbreaks of potentially fatal multidrug-resistant organisms (MDROs) in these facilities.

Under current law, long-term care facilities are required to establish and maintain infection prevention and control programs. Understanding that MDRO infections increase patient complications, lengthen patient hospital stays, worsen clinical outcomes, and significantly increase health care costs overall, the Department of State Health Services (DSHS) has made combatting MDROs a priority, announcing a commitment to antimicrobial stewardship statewide. Antimicrobial stewardship, according to DSHS, is a "coordinated program that promotes the appropriate use of antimicrobials (including antibiotics), improves patient outcomes, reduces microbial resistance, and decreases the spread of infections caused by multidrug-resistant organisms."

To achieve this goal, H.B. 1848 would require each long-term care facility's infection prevention and control program to include monitoring of key infectious agents and multidrug-resistant organisms as well as procedures for making rapid influenza diagnostic tests available to residents. The bill also directs DSHS to create a regional advisory committee in each public health region to address antimicrobial stewardship in long-term care facilities and to improve this stewardship through collaborative action.

H.B. 1848 amends current law relating to prevention of communicable diseases in certain long‑term care facilities.

**RULEMAKING AUTHORITY**

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

**SECTION BY SECTION ANALYSIS**

SECTION 1. Amends Section 81.003, Health and Safety Code, by amending Subdivision (4-a) and adding Subdivision (4-b), as follows:

(4-a) Defines "long-term care facility."

(4-b) Redesignates existing Subdivision (4-a) as Subdivision (4-b) and makes no further changes.

SECTION 2. Amends Subchapter A, Chapter 81, Health and Safety Code, by adding Sections 81.014 and 81.015, as follows:

Sec. 81.014. LONG-TERM CARE FACILITY INFECTION PREVENTION AND CONTROL PROGRAM. Requires each long-term care facility's infection prevention and control program to include:

(1) monitoring of key infectious agents, including multidrug-resistant organisms; and

(2) procedures for making rapid influenza diagnostic tests available to facility residents.

Sec. 81.015. ANTIMICROBIAL STEWARDSHIP REGIONAL ADVISORY COMMITTEES. (a) Requires the Department of State Health Services to establish a regional advisory committee in each public health region designated under Section 121.007 (Public Health Regions) to address antimicrobial stewardship in long-term care facilities and to improve antimicrobial stewardship through collaborative action.

(b) Requires a regional advisory committee established under this section to include physicians, directors of nursing or equivalent consultants with long-term care facilities, public health officials knowledgeable about antimicrobial stewardship, and other interested parties.

SECTION 3. Effective date: September 1, 2019.